

Serial No.: 10/805,881

Attorney Docket No.: 800812-0005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s)

: Ibert C. Wells, Ph.D.

Serial No.

: 10/805,881

Filing Date

March 22, 2004

Title

: METHOD FOR DETECTING DEFICIENT

CELLULAR MEMBRANE TIGHTLY BOUND MAGNESIUM FOR DISEASE DIAGNOSES

Group/Art Unit

: 1644

Examiner

Not Yet Assigned

Confirmation No.

9725

Atty. Docket No.

800812-0005

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97(b)

NO FEE Commissioner for Patents F.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 C.F.R. § 1.56 and § 1.97(b), the references listed below and on the attached Form PTO/SB/08A (Substitute for Form 1449A-B/PTO) are being brought to the attention of the Examiner for consideration in connection with the examination of the above-identified patent application. Copies of the cited documents are enclosed. Submission of these references is not an admission that the references constitute prior art.

Applicant respectfully requests that these references be made of record in the above-identified application and considered by the Examiner during prosecution of the application.

Certificate of Mailing Under 37 C.F.R. 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to NO FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Date:	xx 7, 2009
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The Director is hereby authorized to charge any additional amount required, or credit any overpayment, to Deposit Account No. 19-4409.

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It is respectfully submitted that the present invention as claimed is patentable over the listed references.

This information disclosure statement is being filed within three months of the filing date of a national application other than a continued prosecution application under § 1.53(d) or before the mailing of a first Office Action on the merits. Accordingly, no fee is due.

Acknowledgment of receipt is respectfully requested.

Respectfully submitted,

By:

Nancy T. Morris, Reg. No. 42(017

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PTO/SB/08B (08-03)

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Substitute for form 1449/PTO				Application Number	10/805,881	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Filing Date	03/22/04	
				First Named Inventor	Ibert C. Wells	
				Art Unit	1644	
(Use as many sheets as necessary)			ecessary)	Examiner Name	Not yet assigned	
Sheet	1	of	1	Attorney Docket Number	800812-0005	

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²		
		SOLOMON, CAREN and Seely, Ellen, "Preeclampsia - Searching for the Cause", New England Journal of Medicine. 2004, Vol. 350, No. 7, pg. 641-642.			
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Examiner	,	Date	
Signature		Conside	red

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). ² Applicant is to piace a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

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